#### **Developmental Disabilities**

# COLORADO Department of Health Care

| Service Description   | Proc<br>Code                       | Mod<br>#1                   | Mod<br>#2   | Mod<br>#3                                    | Mod<br>#4                              | F                     | -COVID<br>Rate<br>ective                                | COVID<br>Enhanced<br>Rates<br>Effective |  | Unit Value  | Comments  |
|---|------------------------------------|-----------------------------|---|--|--|-----------------------|---|---|--|---|---|
|   |                                    |                             |   |  |  | 07/0                  | 1/2020  |   | 01/2021                                    |   |   |
| Behavioral Services   |                                    |                             |   |  |  |                       |   |   |  |   |   |
| Behavioral Line Staff   | H2019                              | U3                          |   |  |  | \$                    | 7.23  | \$                                      | 7.23                                       | 15 Minutes  | Maximum of 960 units per Service Plan year.                                 |
| Behavioral Consultation   | H2019                              | U3                          | 22  | TG   |  | \$                    | 25.54   | \$                                      | 25.54                                      | 15 Minutes  | Maximum of 80 units per<br>Service Plan year.                               |
| Behavioral Counseling   | H2019                              | U3                          | TF  | TG   |  | \$                    | 25.54   | \$                                      | 25.54                                      | 15 Minutes  | Maximum of 208 combined units of  |
| Behavioral Counseling,<br>Group   | H2019                              | U3                          | TF  | HQ   |  | \$                    | 8.61  | \$                                      | 8.61                                       | 15 Minutes  | Individual and Group<br>Counseling services per<br>Service Plan year.       |
| Behavioral Plan<br>Assessment   | T2024                              | U3                          | 22  |  |  | \$                    | 25.54   | \$                                      | 25.54                                      | 15 Minutes  | Maximum of 40 units and one Behavior Plan Assessment per Service Plan year. |
| Day Habilitation  |                                    |                             |   |  |  |                       |   |   |  |   |   |
| Service Plan year. Maxim<br>Services, and Supported   | um of 7,11                         | l2 com                      | bined ι   | units of                                     | Specia                                 |                       |   |   |  |   | vocational Services per<br>nnections, Prevocational                         |
| Service Plan year. Maxim<br>Services, and Supported   | um of 7,11<br>Employme             | 12 com<br>ent per           | bined u<br>Service                                      | units of<br>e Plan t                         | Specia<br>year.<br>: Tradi             | alized<br>tional      | Habilitati  | ion, S                                  | Supported<br>del                           |   | nnections, Prevocational  |
| Service Plan year. Maxim<br>Services, and Supported   | um of 7,11<br>Employme             | 12 com<br>ent per           | bined u<br>Service                                      | units of<br>e Plan t                         | Specia<br>year.<br>: Tradi             | alized<br>tional      | Habilitati  | ion, S                                  | Supported<br>del                           | Community Co  | nnections, Prevocational  |
| Service Plan year. Maxim<br>Services, and Supported<br>Service<br>Specialized Habilitation<br>Level 1<br>Specialized Habilitation<br>Level 2  | um of 7,11<br>Employme             | 12 com<br>ent per<br>mporai | bined u<br>Service                                      | units of<br>e Plan t                         | Specia<br>year.<br>: Tradi             | alized tional         | Habilitati  | ion, S<br>t <b>Mo</b> e<br>e end        | Supported  del  d of the pu                | Community Cou   | nnections, Prevocational  |
| Service Plan year. Maxim Services, and Supported  Service Specialized Habilitation Level 1 Specialized Habilitation Level 2 Specialized Habilitation Level 3  | es may te                          | 12 com<br>ent per<br>mporai | bined u<br>Service<br>rily be d<br>HQ                   | units of<br>e Plan<br>Tier 2<br>delivere     | Specia<br>year.<br>: Tradi             | tional                | Habilitati<br>I/Current<br>trough the<br>2.57           | t Moe<br>e ene                          | del<br>d of the pu                         | ublic health eme  | nnections, Prevocational  |
| Service Plan year. Maxim Services, and Supported  Service Specialized Habilitation Level 1 Specialized Habilitation Level 2 Specialized Habilitation Level 3 Specialized Habilitation Level 4   | es may te T2021                    | u3                          | bined u<br>Service<br>rily be d<br>HQ<br>22             | Tier 2 delivere                              | Specia<br>year.<br>: Tradi             | alized tional ally th | Habilitati<br>I/Current<br>trough the<br>2.57<br>2.83   | t Mode end                              | del<br>d of the pu<br>3.53<br>3.89         | ublic health eme  15 Minutes  15 Minutes                                      | nnections, Prevocational  |
| Service Plan year. Maxim Services, and Supported  Services, and Supported  Specialized Habilitation Level 1 Specialized Habilitation Level 2 Specialized Habilitation Level 3 Specialized Habilitation Level 4 Specialized Habilitation Level 5 | es may te T2021 T2021 T2021        | u3<br>U3                    | bined to<br>Service<br>rily be of<br>HQ<br>22<br>TF     | units of<br>Plan<br>Tier 2<br>delivere<br>HQ | Specia<br>year.<br>: Tradi<br>ed virtu | tional ally th        | //Current<br>rough the<br>2.57<br>2.83<br>3.15          | t Mode end                              | del<br>d of the pu<br>3.53<br>3.89<br>4.33 | ublic health eme 15 Minutes 15 Minutes 15 Minutes                             | nnections, Prevocational  |
| Service Plan year. Maxim Services, and Supported  Services, and Supported  Specialized Habilitation Level 1 Specialized Habilitation Level 2 Specialized Habilitation Level 3 Specialized Habilitation Level 4 Specialized Habilitation         | res may te T2021 T2021 T2021 T2021 | U3 U3 U3                    | bined u<br>Service<br>rily be o<br>HQ<br>22<br>TF<br>TF | Tier 2  HQ  HQ  22                           | Specia<br>year.<br>: Tradi<br>ed virtu | tional ally th        | I/Current<br>arough the<br>2.57<br>2.83<br>3.15<br>3.71 | t Mode end                              | 3.53<br>3.89<br>4.33<br>5.10               | Lommunity Consults to Minutes  15 Minutes  15 Minutes  15 Minutes  15 Minutes | nnections, Prevocational  |

|  | Must be delivered in person. |    |    |    |  |    |      |    |      |            |  |  |  |  |
|--|------------------------------|----|----|----|--|----|------|----|------|------------|--|--|--|--|
| Specialized Habilitation,<br>All Support Levels  | S5100                        | U3 |    |    |  | \$ | 5.36 | \$ | 7.36 | 15 Minutes |  |  |  |  |
| Tier 2: Traditional/Current Model  Services may temporarily be delivered virtually through the end of the public health emergency. |                              |    |    |    |  |    |      |    |      |            |  |  |  |  |
| Supported Community Connections Level 1  | T2021                        | U3 |    |    |  | \$ | 3.13 |    |      | 15 Minutes |  |  |  |  |
| Supported Community Connections Level 2  | T2021                        | U3 | 22 |    |  | \$ | 3.42 | \$ | 4.70 | 15 Minutes |  |  |  |  |
| Supported Community Connections Level 3  | T2021                        | U3 | TF |    |  | \$ | 3.87 | \$ | 5.32 | 15 Minutes |  |  |  |  |
| Supported Community Connections Level 4  | T2021                        | U3 | TF | 22 |  | \$ | 4.44 | \$ | 6.10 | 15 Minutes |  |  |  |  |



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| Service Description  | Proc<br>Code | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | Ef   | e-COVID<br>Rate<br>fective<br>01/2020 | En<br>F | COVID<br>hanced<br>Rates<br>fective<br>01/2021 | Unit Value | Comments  |
|--|--------------|-----------|-----------|-----------|-----------|------|---------------------------------------|---------|--|------------|---|
| Supported Community Connections Level 5  | T2021        | U3        | TG        |           |           | \$   | 5.35                                  | \$      | 7.35   | 15 Minutes |   |
| Supported Community Connections Level 6  | T2021        | U3        | TG        | 22        |           | \$   | 7.03                                  | \$      | 9.66   | 15 Minutes |   |
| Supported Community Connections Level 7  | T2021        | U3        | sc        |           |           | \$   | 10.38                                 | \$      | 14.26  | 15 Minutes |   |
|  |              |           |           |           |           |      |                                       |         |  |            |   |
| Supported Community<br>Connections, All Support<br>Levels  | S5100        | U3        | НВ        |           |           | \$   | red in per<br>7.03                    | \$      | 9.66   | 15 Minutes |   |
| Dental Services  |              |           |           |           |           |      |                                       |         |  |            |   |
| Basic  | D2999        | U3        |           |           |           |      | -                                     |         | -  | Dollar     | Please refer to DIDD  Dental Fee Schedule for   |
| Major  | D2999        | U3        | 22        |           |           |      | -                                     |         | -  | Dollar     | rates   |
| Home Delivered Meals   | S5170        | U3        |           |           |           | \$   | 11.45                                 | \$      | 11.45  | Per Meal   | 2 Meals per day, 14<br>meals per week; Available<br>up to 365 after enrollment  |
| Non-Medical Transportat<br>Maximum of 508 units (trip  |              | rvice P   | Plan yea  | ar (all n | nileage   | band | ds plus pu                            | ıblic   | conveyan                                       | ce).       |   |
| Mileage Band 1 (0-10<br>Miles)   | T2003        | U3        |           |           |           | \$   | 6.58                                  | \$      | 9.04   | 1 Trip     |   |
| Mileage Band 2 (11-20<br>Miles)  | T2003        | U3        | 22        |           |           | \$   | 13.77                                 | \$      | 18.92  | 1 Trip     |   |
| Mileage Band 3 (Over 20 Miles)   | T2003        | U3        | TF        |           |           | \$   | 20.97                                 | \$      | 28.81  | 1 Trip     |   |
| Other (public conveyance)  | T2004        | U3        |           |           |           | \$   | 1.00                                  | \$      | 1.00   | Dollar     | Bus passes or other public conveyance may be used only when equivalent to or more cost effective than the applicable mileage range. |
| Peer Mentorship  | H2015        | U3        |           |           |           | \$   | 5.92                                  | \$      | 5.92   | 15 minutes | Available for 365 days after enrollment   |
| Prevocational Services Maximum of 4,800 combinations Service Plan year. Maximu Services, and Supported E | m of 7,11    | l2 com    | bined u   | units of  | Specia    |      |                                       |         |  |            | vocational Services per   |
| Prevocational Services<br>Level 1  | T2015        | U3        | HQ        |           |           | \$   | 2.57                                  | \$      | 2.57   | 15 Minutes |   |
| Prevocational Services   | T2015        | U3        | 22        | HQ        |           | \$   | 2.83                                  | \$      | 2.83   | 15 Minutes |   |
| Level 2  | 12010        |           |           |           |           |      |                                       |         |  |            |   |
| Level 2 Prevocational Services Level 3   | T2015        | U3        | TF        | HQ        |           | \$   | 3.15                                  | \$      | 3.15   | 15 Minutes |   |



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|---|--------------|-----------|-----------|-----------|-----------|-----|--|-----|--|------------|----------|
| Prevocational Services<br>Level 5                           | T2015        | U3        | TG        | HQ        |           | \$  | 4.59   | \$  | 4.59   | 15 Minutes |          |
| Prevocational Services Level 6                              | T2015        | U3        | TG        | 22        | HQ        | \$  | 6.59   | \$  | 6.59   | 15 Minutes |          |
| Residential Habilitation,                                   | Outside l    | Denve     | r Coun    | ty        |           |     |  |     |  |            |          |
| Group Residential<br>Services and Supports-<br>Level 1      | T2016        | U3        | HQ        |           |           | \$  | 116.82                                       | \$  | 126.17   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 2      | T2016        | U3        | 22        | HQ        |           | \$  | 140.71                                       | \$  | 151.97   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 3      | T2016        | U3        | TF        | HQ        |           | \$  | 159.22                                       | \$  | 171.96   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 4      | T2016        | U3        | TF        | 22        | HQ        | \$  | 181.66                                       | \$  | 196.19   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 5      | T2016        | U3        | TG        | HQ        |           | \$  | 198.98                                       | \$  | 214.90   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 6      | T2016        | U3        | TG        | 22        | HQ        | \$  | 231.12                                       | \$  | 249.61   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 7      | T2016        | U3        | SC        | HQ        |           | *NF | ₹  | *NF | ₹  | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 1 | T2016        | U3        |           |           |           | \$  | 70.78  | \$  | 70.78  | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 2 | T2016        | U3        | 22        |           |           | \$  | 114.35                                       | \$  | 114.35   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 3 | T2016        | U3        | TF        |           |           | \$  | 139.74                                       | \$  | 139.74   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 4 | T2016        | U3        | TF        | 22        |           | \$  | 170.12                                       | \$  | 170.12   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 5 | T2016        | U3        | TG        |           |           | \$  | 195.50                                       | \$  | 195.50   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 6 | T2016        | U3        | TG        | 22        |           | \$  | 245.69                                       | \$  | 245.69   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 7 | T2016        | U3        | SC        |           |           | *NF | ₹  | *NF | ₹  | Day        |          |



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|--|--------------|-----------|-----------|-----------|-----------|-----|---|----------|--|------------|----------|
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 1 | T2016        | U3        | TT        |           |           | \$  | 65.65                                   | \$       | 65.65  | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 2 | T2016        | U3        | 22        | Π         |           | \$  | 106.06                                  | \$       | 106.06   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 3 | T2016        | U3        | TF        | П         |           | \$  | 129.58                                  | \$       | 129.58   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 4 | T2016        | U3        | TF        | 22        | Π         | \$  | 157.79                                  | \$       | 157.79   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 5 | T2016        | U3        | TG        | F         |           | \$  | 181.30                                  | ₩        | 181.30   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 6 | T2016        | U3        | TG        | 22        | TT        | \$  | 227.87                                  | \$       | 227.87   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 7 | T2016        | U3        | SC        | TT        |           | *NI | R                                       | *NF      | ?  | Day        |          |
| Residential Habilitation,  | Denver C     | ounty     |           |           |           |     |   |          |  |            |          |
| Group Residential<br>Services and Supports-<br>Level 1                   | T2016        | U3        | HQ        |           |           | \$  | 122.73                                  | \$       | 132.55   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 2                   | T2016        | U3        | 22        | HQ        |           | \$  | 148.24                                  | \$       | 160.10   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 3                   | T2016        | U3        | TF        | HQ        |           | \$  | 168.40                                  | \$       | 181.87   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 4                   | T2016        | U3        | TF        | 22        | HQ        | \$  | 192.96                                  | \$       | 208.40   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 5                   | T2016        | U3        | TG        | HQ        |           | \$  | 212.65                                  | \$       | 229.66   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 6                   | T2016        | U3        | TG        | 22        | HQ        | \$  | 248.70                                  | \$       | 268.60   | Day        |          |
| Group Residential<br>Services and Supports-<br>Level 7                   | T2016        | U3        | SC        | HQ        |           | \$  | -                                       | *NF      | ₹  | Day        |          |

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|--|--------------|-----------|-----------|-----------|-----------|----|---|---------------|--|------------|----------|
| Individual Residential<br>Services and Supports-<br>Level 1              | T2016        | U3        |           |           |           | \$ | 75.44                                     | \$            | 75.44  | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 2              | T2016        | U3        | 22        |           |           | \$ | 122.50                                    | \$            | 122.50   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 3              | T2016        | U3        | TF        |           |           | \$ | 150.57                                    | \$            | 150.57   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 4              | T2016        | U3        | TF        | 22        |           | \$ | 184.52                                    | \$            | 184.52   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 5              | T2016        | U3        | TG        |           |           | \$ | 213.67                                    | \$            | 213.67   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 6              | T2016        | U3        | TG        | 22        |           | \$ | 270.88                                    | \$            | 270.88   | Day        |          |
| Individual Residential<br>Services and Supports-<br>Level 7              | T2016        | U3        | SC        |           |           | \$ | -   | *NF           | ₹  | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 1 | T2016        | U3        | Γ         |           |           | \$ | 69.58                                     | \$            | 69.58  | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 2 | T2016        | U3        | 22        | тт        |           | \$ | 112.97                                    | \$            | 112.97   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 3 | T2016        | U3        | TF        | ТТ        |           | \$ | 138.78                                    | \$            | 138.78   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 4 | T2016        | U3        | TF        | 22        | ТТ        | \$ | 170.09                                    | \$            | 170.09   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 5 | T2016        | U3        | TG        | Π         |           | \$ | 196.90                                    | \$            | 196.90   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 6 | T2016        | U3        | TG        | 22        | П         | \$ | 249.62                                    | \$            | 249.62   | Day        |          |
| Individual Residential<br>Services and<br>Supports/Host Home-<br>Level 7 | T2016        | U3        | SC        | TT        |           | \$ | -   | *NF           | ₹  | Day        |          |
| Specialized Medical Equi   | pment a      | nd Sup    | plies     |           |           |    |   |               |  |            |          |

Version: 1.1

Date: 02/09/2021

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

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|--|--------------|-----------|-----------|-----------|-----------|----|--|----|--|---------------------|---|--|
| Disposable Supplies  | T2028        | U3        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |  |
| Equipment  | T2029        | U3        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |  |
| Supported Employment The maximum Supported Employment units per Service Plan year are limited to 7,112 minus the combined total units for Habilitation, Supported Community Connections and Prevocational Services, which are limited to a maximum of 4,800 units for Coaching, Group- |              |           |           |           |           |    |  |    |  |                     |   |  |
| Level 1  | T2019        | U3        | HQ        |           |           | \$ | 3.44                                       | \$ | 4.73   | 15 Minutes          |   |  |
| Job Coaching, Group-<br>Level 2  | T2019        | U3        | 22        | HQ        |           | \$ | 3.78                                       | \$ | 5.19   | 15 Minutes          |   |  |
| Job Coaching, Group-<br>Level 3  | T2019        | U3        | TF        | HQ        |           | \$ | 4.20                                       | \$ | 5.77   | 15 Minutes          |   |  |
| Job Coaching, Group-<br>Level 4  | T2019        | U3        | TF        | 22        | HQ        | \$ | 4.86                                       | \$ | 6.68   | 15 Minutes          |   |  |
| Job Coaching, Group-<br>Level 5  | T2019        | U3        | TG        | HQ        |           | \$ | 5.79                                       | \$ | 7.95   | 15 Minutes          |   |  |
| Job Coaching, Group-<br>Level 6  | T2019        | U3        | TG        | 22        | HQ        | \$ | 7.57                                       | \$ | 10.40  | 15 Minutes          |   |  |
| Job Coaching-Individual  | T2019        | U3        | SC        |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |  |
| Job Development-Group  | H2023        | U3        | HQ        |           |           | \$ | 4.53                                       | \$ | 6.22   | 15 Minutes          |   |  |
| Job Development,<br>Individual-Levels 1-2  | H2023        | U3        |           |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |  |
| Job Development,<br>Individual-Levels 3-4  | H2023        | U3        | 22        |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |  |
| Job Development,<br>Individual-Levels 5-6  | H2023        | U3        | TF        |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |  |
| Job Placement  | H2024        | U3        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |  |
| Job Placement Group  | H2024        | U3        | HQ        |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |  |
| Community Transition Se  | ervices      |           |           |           |           |    |  |    |  |                     |   |  |
| Coordinator  | T2038        | U3        |           |           |           | \$ | 7.66                                       | \$ | 7.66   | 15 minutes          | 40 units (10 hours);<br>available up to 30 days<br>after enrollment   |  |
| Items Purchased  | A9900        | U3        |           |           |           | \$ | 1,500.00                                   | \$ | 1,500.00   | One Time<br>Payment | Up to \$2,000.00 by request; available up to 30 days after enrollment |  |
| Vision   | V2799        | U3        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |  |

|     | Legend  |  |  |  |  |  |  |  |  |  |  |
|-----|---|--|--|--|--|--|--|--|--|--|--|
| NR* | Individually approved DDD rate  |  |  |  |  |  |  |  |  |  |  |
| 22  | (CPT Defn: Increased procedural services)   |  |  |  |  |  |  |  |  |  |  |
| НВ  | Adult program, non-geriatric  |  |  |  |  |  |  |  |  |  |  |
| HQ  | Group Setting   |  |  |  |  |  |  |  |  |  |  |
| SC  | Medically Necessary Service or Supply   |  |  |  |  |  |  |  |  |  |  |
| TF  | Intermediate Level of Care  |  |  |  |  |  |  |  |  |  |  |
| TG  | Complex/High Tech Level of Care   |  |  |  |  |  |  |  |  |  |  |
| TT  | Individualized service provided to more one patient in the same setting                   |  |  |  |  |  |  |  |  |  |  |
| U3  | Developmentally Disabled (HCPCS Defn: Medicaid Level of Care 1, as defined by each state) |  |  |  |  |  |  |  |  |  |  |



**Supported Living Services** 

# Rates Effective January 1, 2021-March 31, 2021



| Service Description   | Proc<br>Code   | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | F<br>Eff | -COVID<br>Rate<br>ective<br>1/2020 | Er<br>E | COVID hanced Rates ffective /01/2021 | Unit Value               | Comments  |
|---|----------------|-----------|-----------|-----------|-----------|----------|------------------------------------|---------|--------------------------------------|--------------------------|---|
| Assistive Technology  | T2035          | U8        |           |           |           | \$       | 1.00                               | \$      | 1.00                                 | Dollar                   | Maximum of \$10,000 of<br>Assistive Technology,<br>Home Accessibility<br>Adaptations, and Vehicle<br>Modifications combined<br>per Waiver Renewal<br>Period (7/1/19 - 6/30/24). |
| Behavioral Services   |                |           |           |           |           |          |                                    |         |                                      |                          |   |
| Behavioral Line Staff   | H2019          | U8        |           |           |           | \$       | 7.23                               | \$      | 7.23                                 | 15 Minutes               | Maximum of 960 units per<br>Service Plan year.  |
| Behavioral Consultation   | H2019          | U8        | 22        | TG        |           | \$       | 25.54                              | \$      | 25.54                                | 15 Minutes               | Maximum of 80 units per<br>Service Plan year.   |
| Behavioral Counseling   | H2019          | U8        | TF        | TG        |           | \$       | 25.54                              | \$      | 25.54                                | 15 Minutes               | Maximum of 208<br>combined units of<br>Individual and Group   |
| Behavioral Counseling<br>Group  | H2019          | U8        | TF        | HQ        |           | \$       | 8.61                               | \$      | 8.61                                 | 15 Minutes               | Counseling services per<br>Service Plan year.   |
| Behavioral Plan<br>Assessment   | T2024          | U8        | 22        |           |           | \$       | 25.54                              | \$      |                                      | 15 Minutes               | Maximum of 40 units and<br>one Behavior Plan<br>Assessment per Service<br>Plan year.  |
| Consumer Directed Atter   |                |           | Service   | es (CD    | ASS), (   | Outsio   | de Denve                           | er C    |                                      |                          |   |
| CDASS Homemaker   | T2025          | U8        |           |           |           | \$       | 4.44                               | \$      | 4.44                                 | 15 Minutes               |   |
| CDASS Enhanced<br>Homemaker   | T2025          | U8        |           |           |           | \$       | 7.21                               | \$      |                                      | 15 Minutes               |   |
| CDASS Personal Care CDASS Health Maintenance                            | T2025<br>T2025 | U8<br>U8  | SE        |           |           | \$       | 5.85<br>7.43                       | \$      | 5.85<br>7.43                         | 15 Minutes<br>15 Minutes |   |
| Consumer Directed Atten   | ndant Su       | pport S   | Service   | es (CD    | ASS), I   | Denve    | er Count                           | У       |                                      |                          |   |
| CDASS Homemaker   | T2025          | U8        |           |           |           | \$       | -                                  | \$      | 4.59                                 | 15 Minutes               |   |
| CDASS Enhanced<br>Homemaker   | T2025          | U8        |           |           |           | \$       | -                                  | \$      | 7.47                                 | 15 Minutes               |   |
| CDASS Personal Care   | T2025          | U8        |           |           |           | \$       | -                                  | \$      | 6.05                                 | 15 Minutes               |   |
| CDASS Health<br>Maintenance   | T2025          | U8        | SE        |           |           | \$       | -                                  | \$      | 7.57                                 | 15 Minutes               |   |
| CDASS Per Member Per I  |                |           | Vendo     | or        |           | I 4      | 0=                                 | _       | 05.05                                | la a                     |   |
| Acumen- FEA Public Partnerships, LLC-                                   | T2040<br>T2040 | U8<br>U8  |           |           |           | \$       | 85.00<br>103.21                    | \$      |                                      | Month<br>Month           |   |
| FEA<br>Palco- FEA   | T2040          | U8        |           |           |           | \$       |                                    | \$      | 85.00                                |                          |   |
| Day Habilitation<br>Maximum of 7,112 combine<br>Supported Employment pe |                | •         |           | Habilit   | ation, S  | Suppo    | rted Con                           | nmu     | nity Conne                           | ections, Prevoca         | tional Services, and  |
| Service   | es may te      | mporar    | rily be o |           |           |          | /Current                           |         |                                      | ublic health eme         | rgency.   |
| Specialized Habilitation<br>Level 1                                     | T2021          | U8        | HQ        |           |           | \$       | 2.57                               | \$      | 3.53                                 | 15 Minutes               |   |

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**Supported Living Services** 

# Rates Effective January 1, 2021-March 31, 2021



| Service Description   | Proc<br>Code | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | R<br>Effe | COVID<br>Rate<br>ective<br>1/2020 | En<br>Ef | COVID<br>hanced<br>Rates<br>fective<br>01/2021 | Unit Value       | Comments  |  |
|---|--------------|-----------|-----------|-----------|-----------|-----------|-----------------------------------|----------|--|------------------|---|--|
| Specialized Habilitation<br>Level 2                                   | T2021        | U8        | 22        | HQ        |           | \$        | 2.83                              | \$       | 3.89   | 15 Minutes       |   |  |
| Specialized Habilitation Level 3                                      | T2021        | U8        | TF        | HQ        |           | \$        | 3.15                              | \$       | 4.33   | 15 Minutes       |   |  |
| Specialized Habilitation Level 4                                      | T2021        | U8        | TF        | 22        | HQ        | \$        | 3.71                              | \$       | 5.10   | 15 Minutes       |   |  |
| Specialized Habilitation<br>Level 5                                   | T2021        | U8        | TG        | HQ        |           | \$        | 4.59                              | \$       | 6.31   | 15 Minutes       |   |  |
| Specialized Habilitation<br>Level 6                                   | T2021        | U8        | TG        | 22        | HQ        | \$        | 6.59                              | \$       | 9.05   | 15 Minutes       |   |  |
| Tier 3: Individual (All Support Levels)  Must be delivered in person. |              |           |           |           |           |           |                                   |          |  |                  |   |  |
| Specialized Habilitation,<br>All Support Levels                       | S5100        | U8        |           |           |           | \$        | 5.36                              | \$       | 7.36   | 15 Minutes       |   |  |
| Service   | es may te    | mporai    | rily be d |           |           |           | /Current                          |          |  | ublic health eme | rgency.   |  |
| Supported Community Connections Level 1                               | T2021        | U8        |           |           |           | \$        | 3.13                              | \$       |  | 15 Minutes       |   |  |
| Supported Community Connections Level 2                               | T2021        | U8        | 22        |           |           | \$        | 3.42                              | \$       | 4.70   | 15 Minutes       |   |  |
| Supported Community Connections Level 3                               | T2021        | U8        | TF        |           |           | \$        | 3.87                              | \$       | 5.32   | 15 Minutes       |   |  |
| Supported Community Connections Level 4                               | T2021        | U8        | TF        | 22        |           | \$        | 4.44                              | \$       | 6.10   | 15 Minutes       |   |  |
| Supported Community Connections Level 5                               | T2021        | U8        | TG        |           |           | \$        | 5.35                              | \$       | 7.35   | 15 Minutes       |   |  |
| Supported Community Connections Level 6                               | T2021        | U8        | TG        | 22        |           | \$        | 7.03                              | \$       | 9.66   | 15 Minutes       |   |  |
|   |              |           | Ti        |           |           |           | I Suppo<br>ed in per              |          | vels)  |                  |   |  |
| Supported Community<br>Connections, All Support<br>Levels             | S5100        | U8        | НВ        |           |           | \$        | 7.03                              | \$       | 9.66   | 15 Minutes       |   |  |
| Dental Services   |              |           |           |           |           |           |                                   |          |  |                  |   |  |
| Basic   | D2999        | U8        |           |           |           |           | -                                 |          | -  | Dollar           | Please refer to DIDD  Dental Fee Schedule for   |  |
| Major   | D2999        | U8        | 22        |           |           |           | -                                 |          | -  | Dollar           | rates   |  |
| Home Accessibility<br>Adaptations                                     | S5165        | U8        |           |           |           | \$        | 1.00                              | \$       | 1.00   | Dollar           | Maximum of \$10,000 of<br>Assistive Technology,<br>Home Accessibility<br>Adaptations, and Vehicle<br>Modifications combined<br>per Waiver Renewal<br>Period (7/1/19 - 6/30/24). |  |
| Home Delivered Meals  | S5170        | U8        |           |           |           | \$        | 11.45                             | \$       | 11.45  | Per Meal         | 2 Meals per day, 14<br>meals per week; Available<br>up to 365 after enrollment  |  |

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**Supported Living Services** 

# Rates Effective January 1, 2021-March 31, 2021



| Service Description                                   | Proc<br>Code | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | Eff  | -COVID<br>Rate<br>fective<br>01/2020 | En<br>F<br>Ef | COVID<br>hanced<br>Rates<br>fective<br>01/2021 | Unit Value          | Comments  |
|---|--------------|-----------|-----------|-----------|-----------|------|--------------------------------------|---------------|--|---------------------|---|
| Homemaker   |              |           |           |           |           |      |                                      |               |  |                     |   |
| Basic, Outside Denver County                          | S5130        | U8        |           |           |           | \$   | 4.45                                 | \$            | 4.45   | 15 Minutes          |   |
| Enhanced, Outside<br>Denver County                    | S5130        | U8        | 22        |           |           | \$   | 7.21                                 | \$            |  | 15 Minutes          | Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.    |
| Basic, Denver County                                  | S5130        | U8        |           |           |           | \$   | -                                    | \$            | 5.68   | 15 Minutes          |   |
| Enhanced, Denver<br>County                            | S5130        | U8        | 22        |           |           | \$   | -                                    | \$            | 7.93   | 15 Minutes          | Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.    |
| Life Skills Training                                  | H2014        | U8        |           |           |           | \$   | 11.91                                | \$            | 11.91  | 15 minutes          | 24 units (6 hours) per<br>day; up to 160 units (40<br>hours) per week.<br>Available for 365 days<br>after enrollment                |
| Mentorship  | H2021        | U8        |           |           |           | \$   | 10.91                                | \$            | 10.91  | 15 Minutes          | Maximum of 192 units per<br>Service Plan year.  |
| Non-Medical Transportat<br>Maximum of 508 units (trip |              | rvice P   | lan yea   | ar (all n | nileage   | band | ls plus pu                           | ıblic (       | conveyan                                       | ce).                |   |
| Mileage Band 1 (0-10 Miles)                           | T2003        | U8        |           |           |           | \$   | 6.58                                 | \$            | 9.04   | 1 Trip              |   |
| Mileage Band 2 (11-20<br>Miles)                       | T2003        | U8        | 22        |           |           | \$   | 13.77                                | \$            | 18.92  | 1 Trip              |   |
| Mileage Band 3 (Over 20 Miles)                        | T2003        | U8        | TF        |           |           | \$   | 20.97                                | \$            | 28.81  | 1 Trip              |   |
| Other (public conveyance)                             | T2004        | U8        |           |           |           | \$   | 1.00                                 | \$            | 1.00   | Dollar              | Bus passes or other public conveyance may be used only when equivalent to or more cost effective than the applicable mileage range. |
| Mileage-Not in Day<br>Program                         | T2003        | U8        | SC        |           |           | \$   | 6.58                                 | \$            | 6.58   | 4 Trips per<br>week | All Distances. Maximum of 208 units (4 trips per week) per Service Plan year.   |
| Peer Mentorship                                       | H2015        | U8        |           |           |           | \$   | 5.92                                 | \$            | 5.92   | 15 minutes          | Available for 365 days after enrollment   |
| Personal Care Services                                |              |           |           |           |           |      |                                      |               |  |                     |   |
| Personal Care, Outside<br>Denver County               | T1019        | U8        |           |           |           | \$   | 5.78                                 | \$            | 5.78   | 15 Minutes          |   |
| Personal Care, Denver County                          | T1019        | U8        |           |           |           | \$   | 6.53                                 | \$            | 6.53   | 15 Minutes          |   |







# Rates Effective January 1, 2021-March 31, 2021

| Service Description   | Proc<br>Code                               | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | E    | e-COVID<br>Rate<br>ffective<br>/01/2020 | Er<br>E | COVID hanced Rates ffective /01/2021 | Unit Value       | Comments  |
|---|--|-----------|-----------|-----------|-----------|------|---|---------|--------------------------------------|------------------|---|
| Personal Emergency<br>Response System<br>(PERS)   | S5161                                      | U8        |           |           |           | \$   | 1.00                                    | \$      | 1.00                                 | Dollar           |   |
| Prevocational Services  Maximum of 7,112 combined units of Specialized Habilitation, Supported Community Connections, Prevocational Services, and Supported Employment per Service Plan year. |  |           |           |           |           |      |   |         |                                      |                  |   |
| Prevocational Services Level 1  | T2015                                      | U8        | HQ        |           |           | \$   | 2.57                                    | \$      | 2.57                                 | 15 Minutes       |   |
| Prevocational Services<br>Level 2   | T2015                                      | U8        | 22        | HQ        |           | \$   | 2.83                                    | \$      | 2.83                                 | 15 Minutes       |   |
| Prevocational Services<br>Level 3   | T2015                                      | U8        | TF        | HQ        |           | \$   | 3.15                                    | \$      | 3.15                                 | 15 Minutes       |   |
| Prevocational Services<br>Level 4   | T2015                                      | U8        | TF        | 22        | H         | \$   | 3.71                                    | \$      | 3.71                                 | 15 Minutes       |   |
| Prevocational Services<br>Level 5   | T2015                                      | U8        | TG        | HQ        |           | \$   | 4.59                                    | \$      | 4.59                                 | 15 Minutes       |   |
| Prevocational Services<br>Level 6   | T2015                                      | U8        | TG        | 22        | HQ        | \$   | 6.59                                    | \$      | 6.59                                 | 15 Minutes       |   |
| Professional Services   |  |           |           |           |           |      |   |         |                                      |                  |   |
| Massage Therapy   | 97124                                      | U8        |           |           |           | \$   | 19.10                                   | \$      | 19.10                                | 15 Minutes       |   |
| Movement Therapy<br>Bachelors   | G0176                                      | U8        |           |           |           | \$   | 15.93                                   | \$      | 15.93                                | 15 Minutes       |   |
| Movement Therapy<br>Masters   | G0176                                      | U8        | 22        |           |           | \$   | 23.34                                   | \$      | 23.34                                | 15 Minutes       |   |
| Hippotherapy Individual   | S8940                                      | U8        |           |           |           | \$   | 21.22                                   | \$      | 21.22                                | 15 Minutes       |   |
| Hippotherapy Group Recreational Facility Fees   | S8940                                      | U8        | HQ        |           |           | \$   | 9.02                                    | \$      | 9.02                                 | 15 Minutes       |   |
| / Passes  | S5199                                      | U8        |           |           |           | \$   | 1.00                                    | \$      | 1.00                                 | Dollar           |   |
| Respite Care  |  |           |           |           |           |      |   |         |                                      |                  |   |
| Individual  | S5150                                      | U8        |           |           |           | \$   | 5.64                                    | \$      | 5.64                                 | 15 Minutes       | Use Individual Day rate<br>when Respite services<br>exceed 40 units (10 |
| Individual Day  | S5151                                      | U8        |           |           |           | \$   | 225.72                                  | \$      | 225.72                               | Day              | hours) in a 24 hour period.   |
| Group   | S5151                                      | U8        | HQ        |           |           | \$   | 1.00                                    | \$      | 1.00                                 | Dollar           | Group Respite rates may   |
| Camp (Group, Overnight)   | T2036                                      | U8        |           |           |           | \$   | 1.00                                    | \$      | 1.00                                 | Dollar           | not exceed the rate paid for Individual Respite.                        |
|   | Specialized Medical Equipment and Supplies |           |           |           |           |      |   |         |                                      |                  |   |
| Disposable Supplies   | T2028                                      | U8        |           |           |           | \$   | 1.00                                    | \$      |                                      | Dollar           |   |
| Equipment   | T2029                                      | U8        |           |           |           | \$   | 1.00                                    | \$      | 1.00                                 | Dollar           |   |
| Supported Employment<br>Maximum combined units of<br>is 7,112 units per plan yea  | -  | lized H   | labilitat | ion, Su   | pporte    | d Co | mmunity (                               | Conr    | nections, F                          | revocational and | d Supported Employment  |
| Job Coaching, Group-<br>Level 1   | T2019                                      | U8        | HQ        |           |           | \$   | 3.44                                    | \$      | 4.73                                 | 15 Minutes       |   |
| Job Coaching, Group-<br>Level 2   | T2019                                      | U8        | 22        | HQ        |           | \$   | 3.78                                    | \$      | 5.19                                 | 15 Minutes       |   |



# Rates Effective January 1, 2021-March 31, 2021



| Service Description                       | Proc<br>Code | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | E  | re-COVID<br>Rate<br>Effective<br>7/01/2020 | E  | COVID<br>Inhanced<br>Rates<br>Effective<br>1/01/2021 | Unit Value          | Comments  |
|---|--------------|-----------|-----------|-----------|-----------|----|--|----|--|---------------------|---|
| Job Coaching, Group-<br>Level 3           | T2019        | U8        | TF        | HQ        |           | \$ | 4.20                                       | \$ | 5.77   | 15 Minutes          |   |
| Job Coaching, Group-<br>Level 4           | T2019        | U8        | TF        | 22        | HQ        | \$ | 4.86                                       | \$ | 6.68   | 15 Minutes          |   |
| Job Coaching, Group-<br>Level 5           | T2019        | U8        | TG        | Ħ         |           | \$ | 5.79                                       | \$ | 7.95   | 15 Minutes          |   |
| Job Coaching, Group-<br>Level 6           | T2019        | U8        | TG        | 22        | HQ        | \$ | 7.57                                       | \$ | 10.40  | 15 Minutes          |   |
| Job Coaching-Individual                   | T2019        | U8        | SC        |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |
| Job Development-Group                     | H2023        | U8        | HQ        |           |           | \$ | 4.53                                       | \$ | 6.22   | 15 Minutes          |   |
| Job Development,<br>Individual-Levels 1-2 | H2023        | U8        |           |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |
| Job Development,<br>Individual-Levels 3-4 | H2023        | U8        | 22        |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |
| Job Development,<br>Individual-Levels 5-6 | H2023        | U8        | TF        |           |           | \$ | 14.20                                      | \$ | 19.51  | 15 Minutes          |   |
| Job Placement-Individual                  | H2024        | U8        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |
| Job Placement-Group                       | H2024        | U8        | HQ        |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |
| Community Transition Se                   | ervices      |           |           |           |           |    |  |    |  |                     |   |
| Coordinator                               | T2038        | U8        |           |           |           | \$ | 7.66                                       | \$ | 7.66   | 15 minutes          | 40 units (10 hours);<br>available up to 30 days<br>after enrollment   |
| Items Purchased                           | A9900        | U8        |           |           |           | \$ | 1,500.00                                   | \$ | 1,500.00   | One Time<br>Payment | Up to \$2,000.00 by request; available up to 30 days after enrollment   |
| Vehicle Modifications                     | T2039        | U8        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              | Maximum of \$10,000 of<br>Assistive Technology,<br>Home Accessibility<br>Adaptations, and Vehicle<br>Modifications combined<br>per Waiver Renewal<br>Period (7/1/19 - 6/30/24). |
| Vision                                    | V2799        | U8        |           |           |           | \$ | 1.00                                       | \$ | 1.00   | Dollar              |   |

| Support Level Authorization Limits (SPAL) |             |  |  |  |  |  |
|---|-------------|--|--|--|--|--|
| Support Level 1                           | \$21,425.41 |  |  |  |  |  |
| Support Level 2                           | \$28,615.09 |  |  |  |  |  |
| Support Level 3                           | \$32,177.94 |  |  |  |  |  |
| Support Level 4                           | \$36,966.51 |  |  |  |  |  |
| Support Level 5                           | \$44,540.40 |  |  |  |  |  |
| Support Level 6                           | \$58,378.82 |  |  |  |  |  |

| Overall Service Plan Limit |  |
|----------------------------|--|
| \$74,980.63                |  |

|    | Legend                                    |
|----|---|
| 22 | (CPT Defn: Increased procedural services) |

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# Rates Effective January 1, 2021-March 31, 2021

| Service Description | Proc<br>Code   | Mod<br>#1                             | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | Pre-COVID<br>Rate<br>Effective<br>07/01/2020 | COVID<br>Enhanced<br>Rates<br>Effective<br>01/01/2021 | Unit Value | Comments |  |
|---------------------|--|---------------------------------------|-----------|-----------|-----------|--|---|------------|----------|--|
| НВ                  | Adult pr   | Adult program, non-geriatric          |           |           |           |  |   |            |          |  |
| HQ                  | Group S  | Group Setting                         |           |           |           |  |   |            |          |  |
| SC                  | Medical  | Medically Necessary Service or Supply |           |           |           |  |   |            |          |  |
| TF                  | Interme  | Intermediate Level of Care            |           |           |           |  |   |            |          |  |
| TG                  | Comple   | Complex/High Tech Level of Care       |           |           |           |  |   |            |          |  |
| TT                  | TT Individualized service provided to more one patient in the same setting                 |                                       |           |           |           |  |   |            |          |  |
| U8                  | Supported Living Services (HCPCS Defn: Medicaid Level of Care 1, as defined by each state) |                                       |           |           |           |  |   |            |          |  |

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#### **Children's Extensive Supports Waiver**



Rates Effective January 1, 2021-March 31, 2021 COVID COVID **Enhanced** Enhanced Mod **Proc** Mod Mod Mod **Unit Value Service Description** Rates Rates Comments Code #2 #3 #4 **Effective Effective** 01/01/2021 01/01/2021 Adapted Therapeutic Recreational Equipment and Fees T1999 U7 \$ \$ Dollar 1.00 1.00 Equipment Maximum \$1,000 units per year (i.e., \$1,000.00 S5199 U7 \$ \$ Dollar per year combined limit) Fees 1.00 1.00 Maximum of \$10,000 of Assistive Technology, Home Accessibility T2035 U7 \$ 1.00 \$ 1.00 Dollar Adaptations, and Vehicle Assistive Technology Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24). Community Connector H2021 U7 \$ 9.08 \$ 9.08 15 Minutes Maximum of \$10,000 of Assistive Technology, Home Accessibility Home Accessible S5165 U7 \$ 1.00 \$ 1.00 Dollar Adaptations, and Vehicle Adaptations Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24). Homemaker Basic, Outside Denver S5130 U7 \$ 15 Minutes 4.45 \$ 4.45 County Requires a habilitative plan as described in the Enhanced, Outside waiver or extraordinary S5130 U7 22 \$ 7.21 \$ 7.21 15 Minutes **Denver County** cleaning due to individual behavioral or medical needs. S5130 U7 \$ 15 Minutes Basic, Denver County \$ 5.68 Requires a habilitative plan as described in the Enhanced, Denver waiver or extraordinary S5130 U7 22 \$ \$ 7.93 15 Minutes cleaning due to individual County behavioral or medical needs. Maximum of \$1,000 per H1010 U7 \$ Parent Education 1.00 1.00 Dollar Service Plan year. **Professional Services** Hippo Therapy S8940 U7 21.22 21.22 15 Minutes \$ \$ Hippo Therapy Group S8940 U7 HQ \$ 9.02 \$ 9.02 15 Minutes 97124 U7 19.10 19.10 15 Minutes Massage \$ \$ Movement Therapy-\$ 15.93 G0176 U7 15.93 \$ 15 Minutes **Bachelors** Movement Therapy-G0176 U7 22 \$ \$

23.34

23.34

15 Minutes

Version: 1.1 Date: 02/09/2021

Masters





#### Rates Effective January 1, 2021-March 31, 2021

| Service Description  | Proc<br>Code  | Mod<br>#1 | Mod<br>#2 | Mod<br>#3 | Mod<br>#4 | En<br>Et | COVID chanced Rates ffective f01/2021 | Er<br>E | COVID hanced Rates ffective /01/2021 | Unit Value | Comments  |
|--|---|-----------|-----------|-----------|-----------|----------|---------------------------------------|---------|--------------------------------------|------------|---|
| Maximum of 30 days and 1,880 additional 15 minute units per Service Plan year.                                 |   |           |           |           |           |          |                                       |         |                                      |            |   |
| Respite Services-<br>Individual  | S5150   | U7        |           |           |           | \$       | 5.64                                  | \$      | 5.64                                 | 15 Minutes | Use Individual Day rate when Respite services exceed 40 units (10   |
| Respite Services-<br>Individual, Per Diem  | S5151   | U7        |           |           |           | \$       | 225.72                                | \$      | 225.72                               | Day        | hours) in a 24 hour period.   |
| Respite Services-Group   | S5151   | U7        | HQ        |           |           | \$       | 1.00                                  | \$      | 1.00                                 | Dollar     | Group Respite rates may   |
| Camp (Group, Overnight)  | T2036   | U7        |           |           |           | \$       | 1.00                                  | \$      | 1.00                                 | Dollar     | not exceed the rate paid for Individual Respite.  |
|  | Specialized Medical Equipment and Supplies Services may be authorized up to the pre-established CCB thresholds, beyond which DDD prior authorization is required. |           |           |           |           |          |                                       |         |                                      |            |   |
| Disposable Supplies  | T2028   | U7        |           |           |           | \$       | 1.00                                  | \$      |                                      | Dollar     |   |
| Equipment  | T2029   | U7        |           |           |           | \$       | 1.00                                  | \$      | 1.00                                 | Dollar     |   |
| Vehicle Modifications  | T2039   | U7        |           |           |           | \$       | 1.00                                  | \$      | 1.00                                 | Dollar     | Maximum of \$10,000 of<br>Assistive Technology,<br>Home Accessibility<br>Adaptations, and Vehicle<br>Modifications combined<br>per Waiver Renewal<br>Period (7/1/19 - 6/30/24). |
| Youth Day Services Services limited to clients ages 12 through 17. Limited to ten (10) hours per calendar day. |   |           |           |           |           |          |                                       |         |                                      |            |   |
| Individual   | T2027   | U7        |           |           |           | \$       | 5.64                                  | \$      | 5.64                                 | 15 Minutes |   |
| Group  | T2027   | U7        | HQ        |           |           | \$       | 1.88                                  | \$      | 1.88                                 | 15 Minutes |   |

| Overall Service Plan Limit |
|----------------------------|
| \$42,218.98                |

|    | Legend                                    |  |  |  |  |  |  |
|----|---|--|--|--|--|--|--|
| 22 | (CPT Defn: Increased procedural services) |  |  |  |  |  |  |
| HQ | Group Setting                             |  |  |  |  |  |  |
| HR | Relative providing care                   |  |  |  |  |  |  |
| TF | Intermediate Level of Care                |  |  |  |  |  |  |
| TG | Complex/High Tech Level of Care           |  |  |  |  |  |  |
| U7 | Children's Extensive Support              |  |  |  |  |  |  |



| ADJUSTMENT TABLE                         |                   |            |  |  |  |  |  |  |
|--|-------------------|------------|--|--|--|--|--|--|
| WAIVER TYPE                              | PERCENT<br>CHANGE | MULTIPLIER |  |  |  |  |  |  |
| Across the Board Decrease Effect         | tive July 1, 20   | 020        |  |  |  |  |  |  |
| HCBS EBD                                 | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS CMHS                                | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS BI                                  | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS SCI                                 | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS DD                                  | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS SLS                                 | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS/DDD/DHS CES                         | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS/DDD/DHS CLLI                        | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS/DDD/DHS CHCBS                       | -1.000%           | 0.99000    |  |  |  |  |  |  |
| HCBS/DDD/DHS CHRP                        | -1.000%           | 0.99000    |  |  |  |  |  |  |
| Travel Time Targeted Rate Increases Eff  | ective Janua      | ry 1, 2021 |  |  |  |  |  |  |
| Agency Homemaker Services                |                   |            |  |  |  |  |  |  |
| (Adult LTSS Waivers)                     | 7.302%            | 1.07302    |  |  |  |  |  |  |
| Agency Personal Care Services            |                   |            |  |  |  |  |  |  |
| (Adult LTSS Waivers)                     | 7.302%            | 1.07302    |  |  |  |  |  |  |
| COVID-19 Related Increases Effection     | ve January 1      | , 2021     |  |  |  |  |  |  |
| Adult Day Services, All Levels           | 37.400%           | 1.37400    |  |  |  |  |  |  |
| Alternative Care Facility                | 8.000%            | 1.08000    |  |  |  |  |  |  |
| Brain Injury Supported Living Program    | 8.000%            | 1.08000    |  |  |  |  |  |  |
| Group Residential Services and Supports, |                   |            |  |  |  |  |  |  |
| All Levels                               | 8.000%            | 1.08000    |  |  |  |  |  |  |
| Non-Medical Transportation, All Adult    |                   |            |  |  |  |  |  |  |
| Waivers                                  | 37.400%           | 1.37400    |  |  |  |  |  |  |
| Specialized Habilitation, All Levels     | 37.400%           | 1.37400    |  |  |  |  |  |  |
| Supported Community Connections          | 37.400%           | 1.37400    |  |  |  |  |  |  |
| Supported Employment, All Levels         | 37.400%           | 1.37400    |  |  |  |  |  |  |

